

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------------------------|------------|---------------------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>[Handwritten initials]</i> | 19 2/10/01 | <i>[Handwritten date]</i> |
| FORMALITY REVIEW | <i>[Handwritten initials]</i> | 305 | 8/17/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
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